For calendary year 2020 or tax year beginning	_	1	12	20			U.S.	Corp	oratio	n Inc	come	Tax I	Reti	ırn				OMB No. 1545-0123
Name   Description   Descrip	Forn Depa	n <b>II</b> artmen	nt of th	e Treasury	For cal		ear 2020 or t	tax year b	eginning		, :	2020, en	ding			, 20		2020
	Inter	nal Re	venue				o to www.i	rs.gov/F	orm1120	for instr	uctions a	nd the I	atest i	nforma	_			
Interconte common				return													-	
Content   Cont	(a	attach	Form 8	851) . 🔲	TYPE										_			
2 Personal handers on					OR					P.O. box,	see instruc	ctions.					•	
Personal sorrecomp	<b>2</b> P	ersona	al holdi	ing co.	PRINT										_			
Marchardon   Milland   M	,					'		province,	country, ar	nd ZIP or t						<b>D</b> Total		· ·
10   115,010	(s	ee inst	ruction	ns) 🔲														· · · · · · · · · · · · · · · · · · ·
Balance Subtract line 1 form line 1a   1c   115,010	4 S										'n	(3)	1				Address	s change
C   Balance. Subtract line 1b from line 1a   1c   115,010		_													112	,010		
2   Cost of goods sold (attach Form 1125-A)   3   115,010													1b					115 010
3   Gross profit. Subtract line 2 from line 1 c.   3   115,010		_													•	•		115,010
Simple   Dividends and inclusions (Schedule C, line 23)   4				•	,		,								•	•		115 010
Solid   Interest   Solid   S	•			•											•	•	H-	115,010
7 Gross royalties 8 Capital gain net income (attach Schedule D (Form 1120)) 9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) 10 Other income (see instructions – attach statement) 11 Total income. Add lines 31 brough 10 12 Compensation of Officers (see instructions – attach Form 1125-E) 13 Salaries and wages (less employment credits) 14 Repairs and maintenance 14 3 3, 220 15 Bad debts 16 Rents 17 Taxes and licenses 17 Taxes and licenses 17 Taxes and licenses 17 Taxes and licenses 17 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562). 20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562). 21 Depletion 22 Advertising 23 Pension, profit-sharing, etc., plans 24 Employee benefit programs 24 Employee benefit programs 25 Pension, profit-sharing, etc., plans 26 Other deductions (attach statement) Other Deductions Statement 27 Total deductions (attach statement) Other Deductions Statement 28 Other deductions (see instructions) 29 Net operating loss deduction (see instructions) 29 Net operating loss deducti	Ĕ	-				•	•	,							•			
7 Gross royalties 8 Capital gain net income (attach Schedule D (Form 1120)) 9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) 10 Other income (see instructions – attach statement) 11 Total income. Add lines 31 brough 10 12 Compensation of Officers (see instructions – attach Form 1125-E) 13 Salaries and wages (less employment credits) 14 Repairs and maintenance 14 3 3, 220 15 Bad debts 16 Rents 17 Taxes and licenses 17 Taxes and licenses 17 Taxes and licenses 17 Taxes and licenses 17 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562). 20 Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562). 21 Depletion 22 Advertising 23 Pension, profit-sharing, etc., plans 24 Employee benefit programs 24 Employee benefit programs 25 Pension, profit-sharing, etc., plans 26 Other deductions (attach statement) Other Deductions Statement 27 Total deductions (attach statement) Other Deductions Statement 28 Other deductions (see instructions) 29 Net operating loss deduction (see instructions) 29 Net operating loss deducti	ncc		_												•		<u> </u>	
8 Capital gain net income (attach Schedule D (Form 1120)) 9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797) 10 Other income (see instructions—attach statement) 11 Total income. Add lines 3 through 10 12 Compensation of officers (see instructions—attach Form 1125-E) 13 Salaries and wages (less employment credits) 13 Salaries and wages (less employment credits) 14 Repairs and maintenance 14 3, 2,20 15 Bad debts 15 Bad debts 16 Rents 16 24,000 17 Taxes and licenses 17 Taxes and licenses 17 Taxes and licenses 17 Taxes and licenses 18 Interest (see instructions) 19 Charitable contributions 10	_	-													•	•		
Second   Part				•											•		H-	
10 Other income (see instructions—attach statement)   10   11   15,010															•	•		
11   Total income. Add lines 3 through 10   12   Compensation of officers (see instructions—attach Form 1125-E)   13   Salaries and wages (less employment credits)   13   13   13   13   14   Repairs and maintenance   14   3 , 220   15   15   8		_		Ū	` ,			,		,					•		<b>—</b>	
12   Compensation of officers (see instructions—attach Form 1125-E)   13   Salaries and wages (less employment credits)   13   Salaries and wages (less employment credits)   13   14   Repairs and maintenance   14   3,220   15   Bad debts   15   16   24,000   15   Bad debts   16   Catalogo   17   Taxes and licenses   19   Charitable contributions   19   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation from Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form Form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form 4562)   20   Depreciation form 4562 not claimed on Form 1125-A or elsewhere on return (attach Form															•			115 010
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Other deductions (attach statement) Other Deductions Statement  Total deductions. Add lines 12 through 26.  Total deductions. Add lines 12 through 26.  Taxable income before net operating loss deduction and special deductions. Subtract line 27 from line 11.  28	Ĭ	24	Er	mployee b	enefit prog	grams											24	
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Taxable income. Subtract line 29c from line 28. See instructions	s (S	27															27	116,119
Taxable income. Subtract line 29c from line 28. See instructions	jo	28	Ta	axable inc	ome befor	e net op	perating loss	deductio	on and spe	ecial ded	luctions. S	Subtract	line 27	from li	ne 11.		28	-1,109
Taxable income. Subtract line 29c from line 28. See instructions	иct	<b>29</b> a	ı Ne	et operatir	ng loss de	duction	(see instruct	tions) .					29a					
Taxable income. Subtract line 29c from line 28. See instructions	Sed	b	Sp	pecial ded	luctions (S	Schedule	e C, line 24)						29b					
Total tax (Schedule J, Part I, line 11)	_	C															29c	
Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    10/11/2021	Б	30															30	-1,109
Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    10/11/2021	its, a																	0
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Sign Here  Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    10/11/2021	Тах,						-					mount o	verpai					0
And complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.    10/11/2021		37										e and etate	mente 1					nd helief it is true correct
Here    10/11/2021   PRESIDENT   with the preparer shown below? See instructions.   Yes   No	Sid	nr													pesi Ol			
Paid Preparer  Use Only  Pint/Type preparer's name DAISY M BOVEA DAISY M BOVEA DAISY M BOVEA DAISY M BOVEA Firm's name  BOVEA ACCOUNTING & FIN. SVCS., CORP.  PRESIDENT Title  See instructions. ▼Yes No  PTIN 10/13/2021 Self-employed P00095686  PTIN 5 self-employed P00095686		- 1							10/11	/2021	ישתח ו	ייא מודרד די	Tr.			witl	h the pre	eparer shown below?
Print/Type preparer's name Preparer  Print/Type preparer's name Date DAISY M BOVEA DAISY M BOVEA DAISY M BOVEA DAISY M BOVEA Firm's name  BOVEA ACCOUNTING & FIN. SVCS., CORP.  Print/Type preparer's name Date DATE DATE DATE DATE DATE DATE DATE DATE	пе	:1 C	Si	anature of a	officer				_	/ ZUZI	<b>—</b>	סדחקון.	T			_ See	e instruc	tions. X Yes No
Paid     DAISY M BOVEA     DAISY M BOVEA     DAISY M BOVEA     Check if self-employed P00095686       Preparer Use Only         Firm's name     ► BOVEA ACCOUNTING & FIN. SVCS., CORP.         Firm's EIN ► 65-0752615			, טונ	-		name		Prena		ture	, 1100		Date					PTIN
Use Only  Firm's name ► BOVEA ACCOUNTING & FIN. SVCS., CORP.  Firm's EIN ► 65-0752615				1				'	•					13/20				
USE CHIV		-					ACCOUNT	_			CORI		1 + 0 / -					
	Us	e O	nly										184					

Sch	edule C	<b>Dividends, Inclusions, and Special Deductions</b> (see instructions)	(a) Dividends and inclusions	(b) %	(c) Special deductions (a) × (b)
1		from less-than-20%-owned domestic corporations (other than debt-financed		50	
2		from 20%-or-more-owned domestic corporations (other than debt-financed		65	
3	Dividends	on certain debt-financed stock of domestic and foreign corporations		See instructions	
4	Dividends	on certain preferred stock of less-than-20%-owned public utilities		23.3	
5	Dividends	on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6	Dividends	from less-than-20%-owned foreign corporations and certain FSCs		50	
7	Dividends	from 20%-or-more-owned foreign corporations and certain FSCs		65	
8	Dividends	from wholly owned foreign subsidiaries		100	
9	Subtotal.	Add lines 1 through 8. See instructions for limitations		See instructions	
10	Dividends	from domestic corporations received by a small business investment operating under the Small Business Investment Act of 1958		100	
11	Dividends	from affiliated group members		100	
12	Dividends	from certain FSCs		100	
13	-	urce portion of dividends received from a specified 10%-owned foreign (excluding hybrid dividends) (see instructions)		100	
14		from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 any hybrid dividends)			
15	Section 96	5(a) inclusion		See instructions	
16a	the stock of	inclusions derived from the sale by a controlled foreign corporation (CFC) of of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) etions)		100	
b		inclusions derived from hybrid dividends of tiered corporations (attach Form(s) instructions)			
С		usions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 m(s) 5471) (see instructions).			
17	Global Inta	ingible Low-Taxed Income (GILTI) (attach Form(s) 5471 and Form 8992)			
18	Gross-up f	or foreign taxes deemed paid			
19	IC-DISC ar	nd former DISC dividends not included on line 1, 2, or 3			
20	Other divid	lends			
21	Deduction	for dividends paid on certain preferred stock of public utilities			
22	Section 25	0 deduction (attach Form 8993)			
23	Total divid	dends and inclusions. Add column (a), lines 9 through 20. Enter here and on e 4			
24		cial deductions. Add column (c), lines 9 through 22. Enter here and on page 1, lines	ne 29b		

Sch	nedule J Tax Computation and Payment (see instructions)		
Part I	-Tax Computation		
1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions ▶ □		
2	Income tax. See instructions	2	0
3	Base erosion minimum tax amount (attach Form 8991)	3	
4	Add lines 2 and 3	4	0
5a	Foreign tax credit (attach Form 1118)		
b	Credit from Form 8834 (see instructions)		
С	General business credit (attach Form 3800)		
d	Credit for prior year minimum tax (attach Form 8827)		
е	Bond credits from Form 8912		
6	Total credits. Add lines 5a through 5e	6	
7	Subtract line 6 from line 4	7	0
8	Personal holding company tax (attach Schedule PH (Form 1120))	8	
9a	Recapture of investment credit (attach Form 4255)		
b	Recapture of low-income housing credit (attach Form 8611)		
С	Interest due under the look-back method—completed long-term contracts (attach Form 8697)		
d	Interest due under the look-back method—income forecast method (attach Form 8866)  9d		
е	Alternative tax on qualifying shipping activities (attach Form 8902) 9e		
f	Interest/tax due under Section 453A(c) and/or Section 453(l) 9f		
g	Other (see instructions—attach statement)		
10	<b>Total.</b> Add lines 9a through 9g	10	
_11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	0
Part I	I – Section 965 Payments (see instructions)		
12	2020 net 965 tax liability paid from Form 965-B, Part II, column (k), line 4. Enter here and on page 1, line 32	12	
Part I	II – Payments, Refundable Credits, and Section 965 Net Tax Liability		
13	2019 overpayment credited to 2020	13	
14	2020 estimated tax payments	14	
15	2020 refund applied for on Form 4466	<b>15</b> (	)
16	Combine lines 13, 14, and 15	16	
17	Tax deposited with Form 7004	17	0
18	Withholding (see instructions)	18	
19	<b>Total payments.</b> Add lines 16, 17, and 18	19	0
20	Refundable credits from:		
а	Form 2439		
b	Form 4136		
С	Reserved for future use		
d	Other (attach statement—see instructions)		
21	Total credits. Add lines 20a through 20d	21	
22	2020 net 965 tax liability from Form 965-B, Part I, column (d), line 4. See instructions	22	
23	<b>Total payments, credits, and section 965 net tax liability.</b> Add lines 19, 21, and 22. Enter here and on page 1, line 33	23	0

Sch	edule K Other Information (see instructions)					
1	Check accounting method: a 🗵 Cash b 🗌 Accrual	c ☐ Other (specify) ►			Yes	No
2	See the instructions and enter the:					
а	Business activity code no. ► 623000					
b	Business activity ► ASSISTANT LIVING FACILITY					
С	Product or service ► ASSISTANT LIVING FACILITY					
3	Is the corporation a subsidiary in an affiliated group or a parent-sub	osidiary controlled group?				×
	If "Yes," enter name and EIN of the parent corporation ▶					
4	At the end of the tax year:					
а	Did any foreign or domestic corporation, partnership (including organization own directly 20% or more, or own, directly or indirect corporation's stock entitled to vote? If "Yes," complete Part I of Sch	ly, 50% or more of the tot	al voting power of all class	ses of the		×
b	Did any individual or estate own directly 20% or more, or own, directlesses of the corporation's stock entitled to vote? If "Yes," complete	ectly or indirectly, 50% or	more of the total voting po	wer of all		×
_		ete Fart il di Schedule di (i	omi 1120) (attach Schedul	e G) .		
5	At the end of the tax year, did the corporation:					
а	Own directly 20% or more, or own, directly or indirectly, 50% or more any foreign or domestic corporation not included on <b>Form 851</b> , Affiliation If "Yes," complete (i) through (iv) below.					×
	(i) Name of Couragetion	(ii) Employer	(iii) Country of	(iv) Pe	rcenta	ge
	(i) Name of Corporation	Identification Number (if any)	Incorporation	Òwned St	in Voti tock	ng
b	Own directly an interest of 20% or more, or own, directly or indirectly, a (including an entity treated as a partnership) or in the beneficial interest					×
	If "Yes," complete (i) through (iv) below.	(m) F				
	(i) Name of Entity	(ii) Employer Identification Number	(iii) Country of Organization	Percentag		ed in
		(if any)	Organization	Profit, Los	s, or C	apital
				+		
				+		
6	During this tax year, did the corporation pay dividends (other than		•	, i		×
	excess of the corporation's current and accumulated earnings and If "Yes," file Form 5452, Corporate Report of Nondividend Distribut	•				
	If this is a consolidated return, answer here for the parent corporation					
_			•			
7	At any time during the tax year, did one foreign person own, direct classes of the corporation's stock entitled to vote or at least 25% o	•	<b>.</b> .			×
	For rules of attribution, see section 318. If "Yes," enter:	i the total value of all class	ses of the corporation's sto	CK: .		
	(a) Percentage owned ► and (b) Owner's country	v <b>&gt;</b>				
	(c) The corporation may have to file Form 5472, Information Return Corporation Engaged in a U.S. Trade or Business. Enter the numbe	_	•	٠ ا		
8	Check this box if the corporation issued publicly offered debt instru					
-	If checked, the corporation may have to file <b>Form 8281</b> , Information					
9	Enter the amount of tax-exempt interest received or accrued during					
10	Enter the number of shareholders at the end of the tax year (if 100 c	or fewer) ►				
11	If the corporation has an NOL for the tax year and is electing to fore					
••	If the corporation is filing a consolidated return, the statement requor the election will not be valid.		·	·		
12	Enter the available NOL carryover from prior tax years (do not rec	duce it by any deduction i	reported on	4.125		

Sche	edule K Other Information (continued from page 4)		
13	Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year <b>and</b> its total assets at the end of the	Yes	No
	tax year less than \$250,000?	_	
14	Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions		×
	If "Yes," complete and attach Schedule UTP.		
15a	Did the corporation make any payments in 2020 that would require it to file Form(s) 1099?		×
b	If "Yes," did or will the corporation file required Form(s) 1099?		
16	During this tax year, did the corporation have an 80%-or-more change in ownership, including a change due to redemption of its own stock?		×
17	During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?		×
18	Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?		×
19	During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?		×
20	Is the corporation operating on a cooperative basis?		×
21	During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions		×
	If "Yes," enter the total amount of the disallowed deductions ▶ \$		
22	Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2) and (3))		×
	If "Yes," complete and attach Form 8991.		
23	Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		×
24 a	Does the corporation satisfy one or more of the following? See instructions		×
b	The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.		
С	The corporation is a tax shelter and the corporation has business interest expense.  If "Yes," complete and attach Form 8990.		
25	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		×
	If "Yes," enter amount from Form 8996, line 15 ▶ \$		
26	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties held directly or indirectly by the corporation, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the shareholders held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership percentage by vote and by value. See instructions		×
	Percentage: By Vote By Value		
	· · · · · · · · · · · · · · · · · · ·		_

REV 06/06/22 PRO Form **1120** (2020)

Sch	edule L Balance Sheets per Books	Beginning	of tax	year	End of ta	ax year
	Assets	(a)		(b)	(c)	(d)
1	Cash					4,539.
2a	Trade notes and accounts receivable					
b	Less allowance for bad debts	( )			( )	
3	Inventories					
4	U.S. government obligations					
5	Tax-exempt securities (see instructions)					
6	Other current assets (attach statement)					
7	Loans to shareholders					
8	Mortgage and real estate loans					
9	Other investments (attach statement)					
10a	Buildings and other depreciable assets					
b	Less accumulated depreciation	(			(	
11a	Depletable assets					
b	Less accumulated depletion	( )			(	
12	Land (net of any amortization)					
13a	Intangible assets (amortizable only)					
b	Less accumulated amortization	( )			(	
14	Other assets (attach statement)					
15	Total assets					4,539.
	Liabilities and Shareholders' Equity					
16	Accounts payable					
17	Mortgages, notes, bonds payable in less than 1 year					
18	Other current liabilities (attach statement)					
19	Loans from shareholders			13,408.		19,056.
20	Mortgages, notes, bonds payable in 1 year or more					
21	Other liabilities (attach statement)					
22	Capital stock: <b>a</b> Preferred stock					
	<b>b</b> Common stock					
23	Additional paid-in capital					
24	Retained earnings—Appropriated (attach statement)					
25	Retained earnings—Unappropriated			-13,408.		-14,517.
26	Adjustments to shareholders' equity (attach statement)					
27	Less cost of treasury stock		(	)		( )
28	Total liabilities and shareholders' equity		A /** 1. 1	0.		4,539.
Scne	Reconciliation of Income (				eturn	
	Note: The corporation may be requ					
1	Net income (loss) per books	-1,109.	7		d on books this year	
2	Federal income tax per books				this return (itemize):	
3	Excess of capital losses over capital gains .			rax-exempt inte	rest \$	
4	Income subject to tax not recorded on books					
	this year (itemize):		_			
_			8		his return not charged ome this year (itemize):	
5	Expenses recorded on books this year not deducted on this return (itemize):		а		. \$	
а	Depreciation \$			Charitable contrib	utions \$	
a b	O					
c	Travel and entertainment . \$					
Ū			9		8	
6	Add lines 1 through 5	-1,109.	10		ne 28)—line 6 less line 9	-1,109.
	edule M-2 Analysis of Unappropriated					
1	Balance at beginning of year	-13,408.	5		Cash	
2	Net income (loss) per books	-1,109.			Stock	
3	Other increases (itemize):				Property	
	, <u></u>		6		s (itemize):	
			7		6	
4	Add lines 1, 2, and 3	-14,517.	8	Balance at end o	f year (line 4 less line 7)	-14,517.

Form **8879-C** 

## IRS e-file Signature Authorization for Form 1120

orm	1120	OMB No. 1545-0123
UIIII	<b></b>	

For calendar year 2020, or tax year beginning \_\_\_\_\_, 2020, ending \_\_\_\_, 20

2020

Department of the Treasury Internal Revenue Service

► Do not send to the IRS. Keep for your records. ► Go to www.irs.gov/Form8879C for the latest information.

illerriai neveriue Servi	Go to www.irs.gov/Formoo/9C for the latest information	)II.
Name of corporation		Employer identification number
AMOR DE JEST	JS, CORP.	66-0702611
Part I Tax	Return Information (Whole dollars only)	
	me (Form 1120, line 11)	<b>1</b> 115,010.
	come (Form 1120, line 30)	
	Form 1120, line 31)	
· ·	wed (Form 1120, line 35)	
	ent (Form 1120, line 36)	
Part II Dec	aration and Signature Authorization of Officer. Be sure to get a co	ony of the corporation's return
2020 electronic in rue, correct, and electronic income send the corpora ransmission, (b) the U.S. Treasurnstitution accounts financial institution accounts the financial institution accounts a sues related to noome tax returns.	of perjury, I declare that I am an officer of the above corporation and that I had not not the form tax return and accompanying schedules and statements and to the complete. I further declare that the amounts in Part I above are the amount extra return. I consent to allow my electronic return originator (ERO), transition's return to the IRS and to receive from the IRS (a) an acknowledgement the reason for any delay in processing the return or refund, and (c) the day and its designated Financial Agent to initiate an electronic funds without indicated in the tax preparation software for payment of the corporation to debit the entry to this account. To revoke a payment, I must control later than 2 business days prior to the payment (settlement) date. I also a form of the electronic payment of taxes to receive confidential information not the payment. I have selected a personal identification number (PIN) as my and, if applicable, the corporation's consent to electronic funds withdrawal eck one box only	the best of my knowledge and belief, it is is shown on the copy of the corporation's mitter, or intermediate service provider to not of receipt or reason for rejection of the te of any refund. If applicable, I authorize rawal (direct debit) entry to the financial's federal taxes owed on this return, and tact the U.S. Treasury Financial Agent at authorize the financial institutions involved becessary to answer inquiries and resolve signature for the corporation's electronic
	con one box only	
☐ I autho	rize to enter my PI	N as my signature
	ERO firm name	do not enter all zeros
on the	corporation's 2020 electronically filed income tax return.	
As an return.  Officer's signature ▶	officer of the corporation, I will enter my PIN as my signature on the corpora	tion's 2020 electronically filed income tax  Title ▶ PRESIDENT
Part III Cer	ification and Authentication	
certify that the corporation indic	Enter your six-digit EFIN followed by your five-digit self-selected PIN.  above numeric entry is my PIN, which is my signature on the 2020 elected above. I confirm that I am submitting this return in accordance with the Participation, and <b>Pub. 4163</b> , Modernized e-File (MeF) Information for Automatical Pub. 4163, Modernized e-File (MeF) Informatical Pub. 4163, Modernized e-File (Me	he requirements of Pub. 3112, IRS e-file
ERO's signature ► _	Date ▶	10/13/2021

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.  $\ensuremath{\mathbf{BAA}}$  Form **8879-C** (2020)

Form 1120, Line 29a

### **Net Operating Loss Worksheet**

2020

Name	Employer Identification Number
AMOR DE JESUS, CORP.	66-0702611

# Important Information Tax Cuts and Jobs Act (TCJA)

For taxable years ending after December 31, 2017, Net Operating Loss (NOL) rules for carrybacks and carryforwards have changed under the Tax Cuts and Jobs Act (TCJA). Except for certain farming and insurance company (other than life insurance) losses, NOLs can no longer be carried back. NOLs can now be carried forward indefinitely.

# Important Information Coronavirus Aid, Relief, and Economic Security (CARES) Act

For taxable years ending after December 31, 2017, Net Operating Loss (NOL) rules for carrybacks have changed under the Coronavirus Aid, Relief, and Economic Security (CARES) Act. NOLs can now be carried back 5 years.

NOL's under Coronavirus Aid, Relief, and Economic Security Act of 2020 Smart Workshee	t
A Is the business electing out of the five year carryback for a current year NOL? ▶ Yes QuickZoom to Election Statement	

NOL's under Tax Cuts and Jobs Act of 2017: Carryover indefinitely NOL's under Coronavirus Aid, Relief, and Economic Security Act of 2020: Carryover indefinitely

NOL Carryover Year	A Carryover	B Less Carrybacks	C Adjusted Carryover
2019          2018          Totals	2,524. 2,524.		2,524.

NOL Carryover Year	A Carryover	B Less Carrybacks/ Carryovers	C Adjusted Carryover
2017			
2016		-	
2014	1,123.		1,123.
2013	478.		478.
2011			
2010			
2009			
2007			
2006			
2005			
2003			
2002			
2001			
Z000	1,601.		1,601.

### NOL's prior to Taxpayer Relief Act of 1997: Three year carryback, fifteen year carryover

NOL Carryover Year	A Carryover	B Less Carrybacks/ Carryovers	C Adjusted Carryover
2011			

AMOR DE JESUS, CORP.

66-0702611

### **Net Operating Loss Summary**

Not operating 2000 canimary								
A NOL Carryover Available	B Deduction Allowed in Current Year	C Adjustment Under Section 172(b)(2)	D Remaining Carryover 20 Years	E Remaining Carryover Indefinite	F Remaining Carryover 15 Years*			
2,524.				2,524.				
1,123.			1,123. 478.					
				-				
4,125.			1,601.	2,524.				
	NOL Carryover Available  2,524.  1,123. 478.	A NOL Carryover Available Deduction Allowed in Current Year  2,524.  1,123. 478.	A NOL Carryover Available  Deduction Allowed in Current Year  1,123. 478.	A NOL Carryover Available  Deduction Allowed in Current Year  2,524.  1,123. 478.  1,123. 478.	A NOL Carryover Available  Deduction Allowed in Current Year  2,524.  1,123. 478.  1,124.  1,125. 478.			

Less: Carryover expiring due to 20-year limitation ...

Less: Carryover expiring due to 15-year limitation ...

Add: Current year net operating loss ...

Less: Carryback of current year net operating loss ...

Net operating loss carryover to next year ...

5,234.

AMOR DE JESUS, CORP. 660702611 1

## Additional information from your 2020 Federal Corporation Tax Return

## Form 1120: US Corporation Income Tax Return

Line 14 Itemization Statement

Description	Amount
AIR CONDITIONING	1,230
	1,990
Total	3,220

# Form 1120: US Corporation Income Tax Return Other Deductions

### **Continuation Statement**

Description	Amount
GROCERY	18,375
GASOLINE	5,929
AUTO PAYMENT	8,460
CELLULAR & INTERNET (BUSINESS USE)	2,410
FPL	2,271
WATER	2,457
LIABILITY INSURANCE	2,188
AUTO INSURANCE	2,959
WATER BOTTLES	830
OUTSIDE SERVICES	42,000
LANDSCAPING	1,020
Total	88,899

## Case 1:23-cv-24299-FAM

### Document 71-2 Entered on FLSD Docket 06/27/2024 Page 11 of 26

### Florida Corporate Income/Franchise Tax Return

rioriua Gorporale income/Franchise Tax

INTU F-1120, R. 01/20

Rule 12C-1.051
Florida Administrative Code
Effective 01/21

INTU

F-1120

R. 01/20

For calendar year 2020 or tax year beginning

\_\_\_\_\_, 2020 ending\_\_

8140020201231000200503733660702611000

Name AMOR DE JESUS, CORP.

Address 14283 SW 177 STREET

City/State/ZIPMIAMI, FL 33177

Check here if any changes have been made to name or address

66-0702611



### **Computation of Florida Net Income Tax**

1.	Federal taxable income (see instructions)	
	Attach pages 1–5 of federal return Check here if negative X	1109
2.	State income taxes deducted in computing federal taxable income	
	(attach schedule)	0
3.	Additions to federal taxable income (from Schedule I)	0
4.	Total of Lines 1, 2 and 3	1109
5.	Subtractions from federal taxable income (from Schedule II)	0
6.	Adjusted federal income (Line 4 minus Line 5)	1109
7.	Florida portion of adjusted federal income (see instructions)	1109
8.	Nonbusiness income allocated to Florida (from Schedule R)	0
9.	Florida exemption	0
10.	Florida net income (Line 7 plus Line 8 minus Line 9)	0
11.	Tax due: 4.458% of Line 10	0
12.	Credits against the tax (from Schedule V)	0
13.	Total corporate income/franchise tax due (Line 11 minus Line12)	0
14.	a) Penalty: F-22200 b) Other0	
	c) Interest: F-22200 d) Other0 Line 14 Total	0
15.	Total of Lines 13 and 14	0
16.	Payment credits: Estimated tax payments 16a \$ 0	
	Tentative tax payment 16b \$	0
17.	Total amount due: Subtract Line 16 from Line 15. If positive, enter amount due here and on payment coupon.	
	If the amount is negative (overpayment), enter on Line 18 and/or Line 19	0
18.	Credit: Enter amount of overpayment credited to next year's estimated tax here and on payment coupon	0
19.	Refund: Enter amount of overpayment to be refunded here and on payment coupon	0
	REV 06/10/22 PRO	

Payment Coupon for Florida Corporate Income Tax Return
Do Not Detach
YEAR ENDING 12/31/20

To ensure proper credit to your account, enclose your check with tax return when mailing.

taxable year, otherwise return is due 1st day of the 5th month after the close 14283 SW 177 STREET **Address** of the taxable year. City/State/ZIPMIAMI, FL 33177 660702611 0 0 0 20200101 0 0 0 0 20201231 -1109000 0000000 .000000 0 0 0 001 0 0 201 0 0 0 0 0 -1109000 0 0 0 0

PERF LINE----

AMOR DE JESUS, CORP.

Name

If 6/30 year end, return is due 1st day of the 4th month after the close of the

# Case 1:23-cv-24299-FAM Document 71-2 Entered on FLSD Docket 06/27/2024 Page 12 of 26

Attach a copy of your Florida Form F-7004

(extension of time) if applicable.



PO Box 6440

Tallahassee FL 32314-6440

66-0702611

F-1120 R. 01/20 Page 2 of 6

	FEIN	Tugo 2 of C
	This return is considered incomplete unless s not signed, or improperly signed and verified, it will be subject to a penalty. The completed in its entirety.	s a copy of the federal return is attached. The statute of limitations will not start until your return is properly signed and verified. Your
	Under penalties of perjury, I declare that I have examined this return, including acc and complete. Declaration of preparer (other than taxpayer) is based on all inform.	companying schedules and statements, and to the best of my knowledge and belief, it is true, correct, nation of which preparer has any knowledge.
Sign here	Signature of officer (must be an original signature)  Date 03	3/03/2021 Title PRESIDENT
Paid preparers	Preparer's DAISY M BOVEA Date 07	Preparer check if self-employed Preparer's PTIN P 0 0 0 9 5 6 8 6
only	Firm's name (or yours if self-employed) and address BOVEA ACCOUNTING & FIN. SV 13944 SW 8TH STREET STE 214 MIN	710
	13944 SW OIR SIREEL SIE ZI4 MIZ	33184
B. Florida C. Florida D. In E. Princi 6	All Taxpayers Must Answer Questions A of incorporation: FL a Secretary of State document number: P07000036732 a consolidated return? YES NO NO pal Business Activity Code (as pertains to Florida) pal Business Activity Code (as pertains to Florida) 2 3 0 0 0 da extension of time was timely filed? YES NO Tation is a member of a controlled group? YES NO	G-2. Part of a federal consolidated return? YES  NO If yes, provide:  FEIN from federal consolidated return:  Name of corporation:  G-3. The federal common parent has sales, property, or payroll in Florida? YES  NO  H. Location of corporate books: 14283 SW 177 STREET  City: MIAMI State: FL ZIP: 33177  I. Taxpayer is a member of a Florida partnership or joint venture? YES  NO  J. Enter date of latest IRS audit:  a) List years examined:  AC Contact person concerning this return: JOSE MACHADO  a) Contact person telephone number: (786) 201-4302  b) Contact person e-mail address: AVALERIA197601@YAHOO.COM  L. Type of federal return filed 1120 1120S or
Visit the Deinformation, information.  Where to Make check Florid 5050 Tallah	partment website to obtain a list of the required adue date, penalty rate and application to enter the (See section 220.27, Florida Statutes)  Description Send Payments and Returns  A payable to and mail with return to:  a Department of Revenue  W Tennessee Street  assee FL 32399-0135	Remember:  ✓ Make your check payable to the Florida Department of Revenue.  ✓ Write your FEIN on your check.  ✓ Sign your check and return.
	questing a <b>refund</b> (Line 19), send your return to: a Department of Revenue	✓ Attach a copy of your federal return.

## Case 1:23-cv-24299-FAM Document 71-2 Entered on FLSD Docket 06/27/2024 Page 13 of 26

66-0702611

Case 1:23-cv-24299-FAM

FEIN \_\_\_\_\_

F-1120 R. 01/20

	1 LIIV		
		DATA Page 1 of 2	
660702611	0	0	0
-110900	0	0	0
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0	0	0	0
0	0	0	0
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2	0	0	0
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Case 1:23-cv-24299-FAM

F-1120 R. 01/20

	FEIN		
		DATA Page 2 of 2	
660702611	0	0	0
.000000	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
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0	0	0	0

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NAME AMOR DE JESUS, CORP.

FEIN 66-0702611

TAXABLE YEAR ENDING 12/31/20

1 47 (1 4 1	E TRIOR BE SESSE, CORE:	17 VV (DEL TE	UI LIVE
Sc	hedule I — Additions and/or Adjustments to Federal Taxable Income		
1.	Interest excluded from federal taxable income (see instructions)	1.	0
2.	Undistributed net long-term capital gains (see instructions)	2.	0
3.	Net operating loss deduction (attach schedule)	3.	0
4.	Net capital loss carryover (attach schedule)	4.	0
5.	Excess charitable contribution carryover (attach schedule)	5.	0
6.	Employee benefit plan contribution carryover (attach schedule)	6.	0
7.	Enterprise zone jobs credit (Florida Form F-1156Z)	7.	0
8.	Ad valorem taxes allowable as enterprise zone property tax credit (Florida Form F-1158Z)	8.	0
9.	Guaranty association assessment(s) credit	9.	0
10	. Rural and/or urban high crime area job tax credits	10.	0
11	. State housing tax credit	11.	0
12	. Florida Tax Credit Scholarship Program Credits	12.	0
13	. Florida Renewable energy production tax credit	13.	0
14	. New markets tax credit	14.	0
15	. Entertainment industry tax credit	15.	0
16	. Research and Development tax credit	16.	0
17	. Energy Economic Zone tax credit	17.	0
18	. s. 168(k) IRC special bonus depreciation	18.	0
19	. Other additions (attach schedule)	19.	0
20	. Total Lines 1 through 19. Enter total on Line 20 and on Page 1, Line 3.	20.	0

Schedule II — Subtractions from Federal Taxable Income		
1. Gross foreign source income less attributable expenses  (a) Enter s. 78, IRC income \$ 0  (b) plus s. 862, IRC dividends \$ 0  (c) plus s. 951A, IRC, income \$ 0  (d) less direct and indirect expenses and related amounts deducted under s. 250, IRC \$ 0	1.	0
Gross subpart F income less attributable expenses     (a) Enter s. 951, IRC subpart F income \$	2.	0
Note: Taxpayers doing business outside Florida enter zero on Lines 3 through 6, and complete Schedule IV.	3.	0
3. Florida net operating loss carryover deduction (see instructions)	0.	
4. Florida net capital loss carryover deduction (see instructions)	4.	0
5. Florida excess charitable contribution carryover (see instructions)	5.	0
6. Florida employee benefit plan contribution carryover (see instructions)	6.	0
7. Nonbusiness income (from Schedule R, Line 3)	7.	0
8. Eligible net income of an international banking facility (see instructions)	8.	0
9. s.179, IRC expense (see instructions)	9.	0
10. s. 168(k), IRC special bonus depreciation (see instructions)	10.	0
11. Other subtractions (attach statement)	11.	0
12. Total Lines 1 through 11. Enter total on Line 12 and on Page 1, Line 5.	12.	0

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Case 1.23-CV-24299-FAM

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NAME AMOR DE JESUS, CORP.

FEIN 66-0702611

TAXABLE YEAR ENDING 12/31/20

Schedule III — Appo	ortionment of A	ajustea red	ierai i	ncome						
III-A For use by taxpayers doing business outside Florida, except those providing insurance or transportation services.										
	(a)	(b)		(c)			(d)		(e)	$\Box$
	WITHIN FLORIDA	TOTAL EVERYW		Col. (a) ÷ Co			Weight		Weighted Factors	- 1
	(Numerator)	(Denominato	or)	Rounded to Six Decimal			If any factor in Column (b) is zero, see note on Page 9 of the instruction			
4 9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4				Places				tions.	FidCeS	_
Property (Schedule III-B below)	U		0				5% or			
2. Payroll	0		0				5% or			
3. Sales (Schedule III-C below)	0		0			X 50	0% or			
Apportionment fraction (Sum	of Lines 1, 2, and 3, Colu	mn [e]). Enter here	and on	Schedule IV, Line	2.					
III-B For use in computing avera	age value of property (us	se original cost)		WITHIN FI	LORIDA		ТОТ	AL EVER	RYWHERE	
in B 1 of acc in companing avoid	ago raido oi proporty (at	oo ongmar ooot,	a. Begi	inning of year	b. Er	nd of year	c. Beginning of y	ear	d. End of year	
Inventories of raw material, w	ork in process, finished g	oods		0		0		0		0
2. Buildings and other deprecial	ole assets			0		0		0		0
3. Land owned				0		0		0		0
4. Other tangible and intangible (	(financial org. only) assets	(attach schedule)		0		0		0		0
5. Total (Lines 1 through 4)				0		0		0		0
6. Average value of property			ı		0					
a. Add Line 5, Columns (a) and							Ch		0	
b. Add Line 5, Columns (c) and	. ,	total everywnere)					bD			
<ol> <li>Rented property (8 times net a a. Rented property in Florida</li> </ol>	annual rent)		7a		0					
b. Rented property Everywher	е						7b		0	
8. Total (Lines 6 and 7). Enter on	Line 1, Schedule III-A, Co	olumns (a) and (b).								
a. Enter Lines 6 a. plus 7 a. ar			0		0					
Column (a) for total average b. Enter Lines 6 b. plus 7 b. ar			8a							
Column (b) for total average							8b		0	
							(a)		(b)	$\neg$
III-C Sales Factor						_	THÍN FLORIDA	TO	OTAL EVERYWHERE	
						`	nerator)		(Denominator)	_
Sales (gross receipts)						1	J/A			0
2. Sales delivered or shipped to	<u> </u>						0		N/A	
3. Other gross receipts (rents, ro	<u>*                                    </u>	· · · · · · · ·					0			0
4. TOTAL SALES (Enter on Sche	edule III-A, Line 3, Column	ns [a] and [b])					0			0
III-D Special Apportionment Frac	ctions (see instructions)			(a) WITHIN FLOR	RIDA	(b) TOTAL	EVERYWHERE	(c) FL(	ORIDA Fraction ([a] ÷ [k ded to Six Decimal Places	<b>ɔ]</b> )
Insurance companies (attach	copy of Schedule T-Annu	ual Report)			0		0			
2. Transportation services					0		0			$\neg$

S	Schedule IV — Computation of Florida Portion of Adjusted Federal Income						
1.	Apportionable adjusted federal income from Page 1, Line 6	1.	0				
2.	Florida apportionment fraction (Schedule III-A, Line 4)	2.					
3.	Tentative apportioned adjusted federal income (multiply Line 1 by Line 2)	3.	0				
4.	Net operating loss carryover apportioned to Florida (attach schedule; see instructions)	4.	0				
5.	Net capital loss carryover apportioned to Florida (attach schedule; see instructions)	5.	0				
6.	Excess charitable contribution carryover apportioned to Florida (attach schedule; see instructions)	6.	0				
7.	Employee benefit plan contribution carryover apportioned to Florida (attach schedule; see instructions)	7.	0				
8.	Total carryovers apportioned to Florida (add Lines 4 through 7)	8.	0				
9.	Adjusted federal income apportioned to Florida (Line 3 less Line 8; see instructions)	9.	0				

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NAME AMOR DE JESUS, CORP.

FEIN 66-0702611

TAXABLE YEAR ENDING 12/31/20

Sc	chedule V — Credits Against the Corporate Income/Franchise Tax		
1.	Florida health maintenance organization credit (attach assessment notice)	1.	0
2.	Capital investment tax credit (attach certification letter)	2.	0
3.	Enterprise zone jobs credit (from Florida Form F-1156Z attached)	3.	0
4.	Community contribution tax credit (attach certification letter)	4.	0
5.	Enterprise zone property tax credit (from Florida Form F-1158Z attached)	5.	0
6.	Rural job tax credit (attach certification letter)	6.	0
7.	Urban high crime area job tax credit (attach certification letter)	7.	0
8.	Hazardous waste facility tax credit	8.	0
9.	Florida alternative minimum tax (AMT) credit	9.	0
10.	Contaminated site rehabilitation tax credit (attach tax credit certificate)	10.	0
11.	State housing tax credit (attach certification letter)	11.	0
12.	Florida Tax Credit: Scholarship Program Credits. (attach certificate)	12.	0
13.	Florida renewable energy production tax credit	13.	0
14.	New markets tax credit	14.	0
15.	Entertainment industry tax credit	15.	0
16.	Research and Development tax credit	16.	0
17.	Energy Economic Zone tax credit	17.	0
18.	Other credits (attach schedule)	18.	0
19.	Total credits against the tax (sum of Lines 1 through 18 not to exceed the amount on Page 1, Line 11).  Enter total credits on Page 1, Line 12	19.	0

Sche	edule R — Nonbusiness Income				
Line 1.	Nonbusiness income (loss) allocated Type	ed to Florida		<u>Amount</u>	
	Total allocated to Florida(Enter here and on Page 1, Line 8		1		0
Line 2.	Nonbusiness income (loss) allocated Type	ed elsewhere State/country allocated to		Amount	
	Total allocated elsewhere		2		0
Line 3.	<b>Total nonbusiness income</b> Grand total. Total of Lines 1 and 2 (Enter here and on Schedule II, Line 7	······································	3		0

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NAME AMOR DE JESUS, CORP.

FEIN 66-0702611

TAXABLE YEAR ENDING 12/31/20

# Estimated Tax Worksheet For Taxable Years Beginning On or After January 1,

_	Elevida incomo evnected in tovo	ala voor			-1	ф	0
1. 2.							
۷.	Florida Form F-1120N)				2	ф	0
3.	Estimated Florida net income (Li						
4.	Total Estimated Florida tax (4.45)					Ψ	
٦.	Less: Credits against the tax	ove of Line of	\$	0	4.	\$	0
			······ +			Ť	
5.	Computation of installments:						
	Payment due dates and	IIf 6/30 year end, last day	of 4th month,				
	payment amounts:	otherwise last day of 5th	month - Enter 0.25 of Li	ne 4	5a.	_	0
		Last day of 6th month - Er	nter 0.25 of Line 4		5b.	_	0
		Last day of 9th month - Er	nter 0.25 of Line 4		5c.	_	0
		Last day of fiscal year - E	inter 0.25 of Line 4		5d.	_	0
	NOTE: If your estimated tax show below to determine the amended		-	•			
1	Amended estimated tax		-		1	\$	0
2.	Less:					Ψ	
	(a) Amount of overpayment from	n last year elected for credit					
	to estimated tax and applied to		2a - \$	0			
		ed tax declaration (Florida For					
	• • •		-		20	\$	0
3.	Unpaid balance (Line 1 less Line						
⊿							
4.	Amount to be paid (Line 3 divided by number of remaining installments)					Ψ	

## References

The following documents were mentioned in this form and are incorporated by reference in the rules indicated below.

The forms are available online at **floridarevenue.com/forms**.

Form F-2220	Underpayment of Estimated Tax on Florida Corporate Income/Franchise Tax	Rule 12C-1.051, F.A.C.
Form F-7004	Florida Tentative Income/Franchise Tax Return and Application for Extension of Time to File Return	Rule 12C-1.051, F.A.C.
Form F-1156Z	Florida Enterprise Zone Jobs Credit Certificate of Eligibility for Corporate Income Tax	Rule 12C-1.051, F.A.C.
Form F-1158Z	Enterprise Zone Property Tax Credit	Rule 12C-1.051, F.A.C.
Form F-1120N	Instructions for Corporate Income/Franchise Tax Return	Rule 12C-1.051, F.A.C.
Form F-1120ES	Declaration/Installment of Florida Estimated Income/Franchise Tax	Rule 12C-1.051, F.A.C.

Form **F-1120** 

# Section 179 Expense Adjustments

2020

Attach to your return

Name	EIN
AMOR DE JESUS, CORP.	66-0702611

### Subtraction from Income - 1/7th of Excess Sec 179 Deduction:

Origination	Total Excess	Previous	Cumulative	Remaining Amt	Current Year
Year	Sec 179 Ded	Sec 179 Ded	Adjustments	to Subtract	Subtraction
2014	0.	0.		0.	0.
Totals	0.	0.		0.	0.
Enter amount of	0.				

flcw1202.SCR 12/05/20

_	11	120		U.S	. Corpo	ration In	come T	ax F	Retu	rn			OMB No. 1545-0123
Form		of the Treasury	For cal	lendar year 2020 o			, 20						<b>2020</b>
Interr	nal Reve	enue Service			v.irs.gov/Fo	rm1120 for inst	ructions and	d the la	atest ir	nformation			
	heck if			Name							B Emp	loyer ic	dentification number
		identified in 601) : The property of the control of							66-0702611				
	fe/nonlitated retu	fe consoli-	OR	Number, street, an	nd room or suit	e no. If a P.O. box	k, see instruction	ons.			<b>C</b> Date		
		holding co.	PRINT	14283 SW							03/2		
		ch. PH)		City or town, state	or province, c	ountry, and ZIP o	r foreign posta	l code			<b>D</b> Total	assets	(see instructions)
		service corp. uctions)		MIAMI			FL	33	177			\$	4,539
<b>4</b> Sc	chedule I	M-3 attached	E Chec	k if: (1) 🔲 Initial r	eturn	(2) Final retu	urn <b>(</b> 3	1 🗌 (8	Name ch			Address	change
	1a	Gross recei	pts or sale	es					1a	11	5,010		
	b	Returns and	dallowanc	es					1b				
	С	Balance. Si	ubtract line	e 1b from line 1a								1c	115,010
	2	Cost of goo	ds sold (at	ttach Form 1125-/	A)							2	
	3	Gross profit	t. Subtract	t line 2 from line 1	с							3	115,010
цe	4	Dividends a	ınd inclusio	ons (Schedule C, I	line 23) .							4	
Income	5	Interest .										5	
゠	6	Gross rents										6	
	7	Gross royalt	ties									7	
	8	Capital gain	net incom	ne (attach Schedu	le D (Form 1	120))						8	
	9	Net gain or	(loss) from	n Form 4797, Part	II, line 17 (at	tach Form 4797	)					9	
	10	Other incom	ne (see ins	structions—attach	statement)							10	
	11	Total incon	<b>ne.</b> Add lii	nes 3 through 10							. ▶	11	115,010
·:	12	Compensat	ion of offic	cers (see instructio	ons-attach I	Form 1125-E)					. ▶	12	
deductions.)	13	Salaries and	d wages (le	ess employment cr	redits) .							13	
nct	14	Repairs and	d maintena	ance								14	3,220
ed	15	Bad debts .										15	
ono	16	Rents										16	24,000
Si	17	Taxes and li	icenses .									17	
instructions for limitations	18	Interest (see	e instructio	ons)								18	
ita	19	Charitable of	contributio	ns								19	
. <u>⊑</u> ∣	20	Depreciation	n from For	rm 4562 not claim	ed on Form	1125-A or elsew	here on retu	rn (atta	ch For	m 4562) .		20	
ģ	21	Depletion .										21	
Su	22	Advertising										22	
- ţi	23	Pension, pro	ofit-sharin	g, etc., plans .								23	
Ţ	24	Employee b	enefit pro	grams								24	
	25	Reserved for	or future us	se								25	
ee	26	Other deduc	ctions (atta	ach statement) .	Other I	eductions	Stateme	ent .				26	88,899
s) (s	27	Total deduc	ctions. Ad	dd lines 12 throug	h 26						. ▶	27	116,119
ioi	28	Taxable ince	ome befor	re net operating lo	ss deduction	and special de	ductions. Su	btract	line 27	from line 1	1	28	-1,109
함	29a	Net operatir	ng loss de	duction (see instru	uctions) .				29a				
Deductions (Se	b	Special ded	luctions (S	Schedule C, line 24	1)				29b				
	С	Add lines 29	9a and 29b	b								29c	
Ę.	30	Taxable inc	come. Sul	btract line 29c fro	m line 28. Se	e instructions						30	-1,109
Tax, Refundable Credits, and Payments	31			I, Part I, line 11) .								31	0
redi	32	2020 net 96	65 tax liabil	lity paid (Schedule	J, Part II, Iir	ne 12)						32	
ndable Cre Payments	33	Total payme	ents, credi	its, and section 96	55 net tax liab	oility (Schedule	J, Part III, line	e 23) .				33	0
ndak Payr	34	Estimated ta	ax penalty	v. See instructions.	. Check if Fo	rm 2220 is attac	ched			!	<b>▶</b> □	34	
Refu	35	Amount ow	ved. If line	e 33 is smaller than	n the total of	lines 31, 32, an	d 34, enter a	ımount	owed			35	
ax,	36	Overpayme	ent. If line	33 is larger than t	the total of lir	nes 31, 32, and	34, enter am	ount o	verpaid	١		36	0
	37			e 36 you want: Cr						Refun		37	
o:-				declare that I have exart f preparer (other than tax							of my know	vledge ar	nd belief, it is true, correct,
Siç		F - 22		,	,	ı		•					6 discuss this return
He	re	<b></b>				10/11/2021	PRESI	IDEN	Γ		— See	i trie pre instruct	eparer shown below? tions. XYes No
		Signature of o				Date	Title						
Pai	id	1	e preparer's		Prepare	er's signature			Date		Check		PTIN
	epare	er DAISY	M BOV			Y M BOVEA			10/1	3/2021	self-em	ployed	P00095686
	e On	Firm's nar		BOVEA ACCOU									752615
		Firm's add	dress ► 1	.3944 SW 8TI	H STREET	STE 214	MIAMI FI	և 331	184	Pho	ne no. (3	305)2	225-5229

Sch	edule C	<b>Dividends, Inclusions, and Special Deductions</b> (see instructions)	(a) Dividends and inclusions	(b) %	(c) Special deductions (a) × (b)
1		from less-than-20%-owned domestic corporations (other than debt-financed		50	
2		from 20%-or-more-owned domestic corporations (other than debt-financed		65	
3	Dividends	on certain debt-financed stock of domestic and foreign corporations		See instructions	
4	Dividends	on certain preferred stock of less-than-20%-owned public utilities		23.3	
5	Dividends	on certain preferred stock of 20%-or-more-owned public utilities		26.7	
6	Dividends	from less-than-20%-owned foreign corporations and certain FSCs		50	
7	Dividends	from 20%-or-more-owned foreign corporations and certain FSCs		65	
8	Dividends	from wholly owned foreign subsidiaries		100	
9	Subtotal.	Add lines 1 through 8. See instructions for limitations		See instructions	
10	Dividends	from domestic corporations received by a small business investment operating under the Small Business Investment Act of 1958		100	
11	Dividends	from affiliated group members		100	
12	Dividends	from certain FSCs		100	
13	Foreign-so	surce portion of dividends received from a specified 10%-owned foreign (excluding hybrid dividends) (see instructions)		100	
14	Dividends	from foreign corporations not included on line 3, 6, 7, 8, 11, 12, or 13 any hybrid dividends)			
15	Section 96	5(a) inclusion		See instructions	
16a	the stock of	inclusions derived from the sale by a controlled foreign corporation (CFC) of of a lower-tier foreign corporation treated as a dividend (attach Form(s) 5471) ctions)		100	
b		inclusions derived from hybrid dividends of tiered corporations (attach Form(s) instructions)			
С		usions from CFCs under subpart F not included on line 15, 16a, 16b, or 17 m(s) 5471) (see instructions).			
17	Global Inta	ingible Low-Taxed Income (GILTI) (attach Form(s) 5471 and Form 8992)			
18	Gross-up f	or foreign taxes deemed paid			
19	IC-DISC ar	nd former DISC dividends not included on line 1, 2, or 3			
20	Other divid	lends			
21	Deduction	for dividends paid on certain preferred stock of public utilities			
22	Section 25	0 deduction (attach Form 8993)			
23	Total divid	dends and inclusions. Add column (a), lines 9 through 20. Enter here and on e 4			
24		cial deductions. Add column (c), lines 9 through 22. Enter here and on page 1, lines	ne 29b		

Sch	edule J Tax Computation and Payment (see instructions)		
Part I	-Tax Computation		
1	Check if the corporation is a member of a controlled group (attach Schedule O (Form 1120)). See instructions 🕨 🗌		
2	Income tax. See instructions	2	0
3	Base erosion minimum tax amount (attach Form 8991)	3	
4	Add lines 2 and 3	4	0
5a	Foreign tax credit (attach Form 1118)		
b	Credit from Form 8834 (see instructions)		
С	General business credit (attach Form 3800)		
d	Credit for prior year minimum tax (attach Form 8827)		
е	Bond credits from Form 8912		
6	Total credits. Add lines 5a through 5e	6	
7	Subtract line 6 from line 4	7	0
8	Personal holding company tax (attach Schedule PH (Form 1120))	8	
9a	Recapture of investment credit (attach Form 4255)		
b	Recapture of low-income housing credit (attach Form 8611)		
С	Interest due under the look-back method—completed long-term contracts (attach Form 8697)		
d	Interest due under the look-back method—income forecast method (attach Form 8866)  9d		
е	Alternative tax on qualifying shipping activities (attach Form 8902) 9e		
f	Interest/tax due under Section 453A(c) and/or Section 453(l) 9f		
g	Other (see instructions—attach statement)		
10	Total. Add lines 9a through 9g	10	
_11	Total tax. Add lines 7, 8, and 10. Enter here and on page 1, line 31	11	0
Part I	I—Section 965 Payments (see instructions)		
12	2020 net 965 tax liability paid from Form 965-B, Part II, column (k), line 4. Enter here and on page 1, line 32	12	
	II – Payments, Refundable Credits, and Section 965 Net Tax Liability		
13	2019 overpayment credited to 2020	13	
14	2020 estimated tax payments	14	
15	2020 refund applied for on Form 4466	15 (	)
16	Combine lines 13, 14, and 15	16	
17	Tax deposited with Form 7004	17	0
18	Withholding (see instructions)	18	
19	<b>Total payments.</b> Add lines 16, 17, and 18	19	0
20	Refundable credits from:		
a	Form 2439	_	
b			
C C			
d 21	Other (attach statement—see instructions)	21	
22	2020 net 965 tax liability from Form 965-B, Part I, column (d), line 4. See instructions	22	
	• • • • • • • • • • • • • • • • • • • •		
23	<b>Total payments, credits, and section 965 net tax liability.</b> Add lines 19, 21, and 22. Enter here and on page 1, line 33	23	0

Sch	edule K Other Information (see instructions)									
1	Check accounting method: a 🗵 Cash b 🗌 Accrual	c ☐ Other (specify) ▶			Yes	No				
2	See the instructions and enter the:									
а										
b	Business activity ► ASSISTANT LIVING FACILITY									
С	Product or service ► ASSISTANT LIVING FACILITY									
3	Is the corporation a subsidiary in an affiliated group or a parent-sul	bsidiary controlled group?				×				
	If "Yes," enter name and EIN of the parent corporation ▶									
_										
4	At the end of the tax year:									
а	a Did any foreign or domestic corporation, partnership (including any entity treated as a partnership), trust, or tax-exempt organization own directly 20% or more, or own, directly or indirectly, 50% or more of the total voting power of all classes of the corporation's stock entitled to vote? If "Yes," complete Part I of Schedule G (Form 1120) (attach Schedule G)									
b	Did any individual or estate own directly 20% or more, or own, directly sees of the corporation's stock entitled to vote? If "Yes," complete					×				
5	At the end of the tax year, did the corporation:									
а	Own directly 20% or more, or own, directly or indirectly, 50% or more any foreign or domestic corporation not included on <b>Form 851</b> , Affiliatio If "Yes," complete (i) through (iv) below.					×				
	(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	Öwned	ercenta in Voti tock					
b	Own directly an interest of 20% or more, or own, directly or indirectly, (including an entity treated as a partnership) or in the beneficial interest If "Yes," complete (i) through (iv) below.					×				
		(ii) Employer	(iii) Country of		l laximur					
	(i) Name of Entity	Identification Number (if any)	Organization	Percentage Profit, Los	ge Own ss. or C	ed in apital				
		( " )		, , ,	-,					
6	During this tax year, did the corporation pay dividends (other that		•	,		×				
	excess of the corporation's current and accumulated earnings and	•								
	If "Yes," file Form 5452, Corporate Report of Nondividend Distribution									
	If this is a consolidated return, answer here for the parent corporati		•							
7	At any time during the tax year, did one foreign person own, dire classes of the corporation's stock entitled to vote or at least 25% of		٥.			×				
	For rules of attribution, see section 318. If "Yes," enter:	or the total value of all class	es of the corporation's stor	CKY.						
		n/ <b>&gt;</b>								
	(a) Percentage owned ► and (b) Owner's countr									
	(c) The corporation may have to file Form 5472, Information Retur Corporation Engaged in a U.S. Trade or Business. Enter the number	er of Forms 5472 attached	· 	<u></u>						
8	Check this box if the corporation issued publicly offered debt instru- If checked, the corporation may have to file <b>Form 8281</b> , Information									
9	Enter the amount of tax-exempt interest received or accrued during									
10	Enter the number of shareholders at the end of the tax year (if 100	or fewer) ►								
11	If the corporation has an NOL for the tax year and is electing to fore	ego the carryback period, c	heck here (see instructions	s) ▶ □						
	If the corporation is filing a consolidated return, the statement requor the election will not be valid.									
12	Enter the available NOL carryover from prior tax years (do not repage 1. line 29a.)	duce it by any deduction r		4.125						

REV 06/06/22 PRO

Sche	edule K Other Information (continued from page 4)		
13	Are the corporation's total receipts (page 1, line 1a, plus lines 4 through 10) for the tax year <b>and</b> its total assets at the end of the	Yes	No
	tax year less than \$250,000?		
14	Is the corporation required to file Schedule UTP (Form 1120), Uncertain Tax Position Statement? See instructions		×
	If "Yes," complete and attach Schedule UTP.		
15a	Did the corporation make any payments in 2020 that would require it to file Form(s) 1099?		×
b	If "Yes," did or will the corporation file required Form(s) 1099?		
16	During this tax year, did the corporation have an 80%-or-more change in ownership, including a change due to redemption of its own stock?		×
17	During or subsequent to this tax year, but before the filing of this return, did the corporation dispose of more than 65% (by value) of its assets in a taxable, non-taxable, or tax deferred transaction?		×
18	Did the corporation receive assets in a section 351 transfer in which any of the transferred assets had a fair market basis or fair market value of more than \$1 million?		×
19	During the corporation's tax year, did the corporation make any payments that would require it to file Forms 1042 and 1042-S under chapter 3 (sections 1441 through 1464) or chapter 4 (sections 1471 through 1474) of the Code?		×
20	Is the corporation operating on a cooperative basis?		×
21	During the tax year, did the corporation pay or accrue any interest or royalty for which the deduction is not allowed under section 267A? See instructions		×
	If "Yes," enter the total amount of the disallowed deductions ▶ \$		
22	Does the corporation have gross receipts of at least \$500 million in any of the 3 preceding tax years? (See sections 59A(e)(2) and (3))		×
	If "Yes," complete and attach Form 8991.		
23	Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions		×
24	Does the corporation satisfy one or more of the following? See instructions		×
а	The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.		
b	The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.		
С	The corporation is a tax shelter and the corporation has business interest expense.		
	If "Yes," complete and attach Form 8990.		
25	Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		×
	If "Yes," enter amount from Form 8996, line 15 ▶ \$		
26	Since December 22, 2017, did a foreign corporation directly or indirectly acquire substantially all of the properties held directly or indirectly by the corporation, and was the ownership percentage (by vote or value) for purposes of section 7874 greater than 50% (for example, the shareholders held more than 50% of the stock of the foreign corporation)? If "Yes," list the ownership		
	percentage by vote and by value. See instructions		×
	Percentage: By Vote By Value		

REV 06/06/22 PRO Form **1120** (2020)

Sch	edule L Balance Sheets per Books	Beginning	of tax	year	End of ta	x year
	Assets	(a)		(b)	(c)	(d)
1	Cash					4,539.
<b>2</b> a	Trade notes and accounts receivable					
b	Less allowance for bad debts	( )			(	
3	Inventories					
4	U.S. government obligations					
5	Tax-exempt securities (see instructions)					
6	Other current assets (attach statement)					
7	Loans to shareholders					
8	Mortgage and real estate loans					
9	Other investments (attach statement)					
10a	Buildings and other depreciable assets					
b	Less accumulated depreciation	( )			(	
11a	Depletable assets					
b	Less accumulated depletion	( )			(	
12	Land (net of any amortization)					
13a	Intangible assets (amortizable only)					
b	Less accumulated amortization	( )			(	
14	Other assets (attach statement)					
15	Total assets					4,539.
	Liabilities and Shareholders' Equity					
16	Accounts payable					
17	Mortgages, notes, bonds payable in less than 1 year					
18	Other current liabilities (attach statement)					
19	Loans from shareholders			13,408.		19,056.
20	Mortgages, notes, bonds payable in 1 year or more					
21	Other liabilities (attach statement)					
22	Capital stock: <b>a</b> Preferred stock					
	<b>b</b> Common stock					
23	Additional paid-in capital					
24	Retained earnings—Appropriated (attach statement)					14 515
25	Retained earnings—Unappropriated			-13,408.		-14,517.
26	Adjustments to shareholders' equity (attach statement)					
27	Less cost of treasury stock		(	)		( )
28 <b>S</b> alar	Total liabilities and shareholders' equity	Less) ner Beeke \	A/:+b I:	0.	- t	4,539.
Sche	Reconciliation of Income ( Note: The corporation may be requ				eturn	
1	Net income (loss) per books	-1,109.	7		d on books this year this return (itemize):	
2 3	Excess of capital losses over capital gains .				rest \$	
4	Income subject to tax not recorded on books this year (itemize):					
_	Functional and backs this year not		8		his return not charged ome this year (itemize):	
5	Expenses recorded on books this year not deducted on this return (itemize):		а		. \$	
а	Depreciation \$		b	Charitable contrib	utions \$	
b	Charitable contributions . \$		_			
c	Travel and entertainment . \$					
			9		 8	
6	Add lines 1 through 5	-1,109.	10		ne 28)—line 6 less line 9	-1,109.
	edule M-2 Analysis of Unappropriated	II.				<u>,</u>
1	Balance at beginning of year	-13,408.	5		Cash	
2	Net income (loss) per books	-1,109.		b	Stock	
3	Other increases (itemize):			С	Property	
			6	Other decreases	itemize):	
			7		6	
4	Add lines 1, 2, and 3	-14,517.	8	Balance at end o	f year (line 4 less line 7)	-14,517.
		DE: : :				Tarm 1120 (2020)

AMOR DE JESUS, CORP. 660702611 1

## Additional information from your 2020 Federal Corporation Tax Return

### Form 1120: US Corporation Income Tax Return

Line 14 Itemization Statement

Description	Amount
AIR CONDITIONING	1,230
	1,990
Total	3,220

# Form 1120: US Corporation Income Tax Return Other Deductions

### **Continuation Statement**

Description	Amount
GROCERY	18,375
GASOLINE	5,929
AUTO PAYMENT	8,460
CELLULAR & INTERNET (BUSINESS USE)	2,410
FPL	2,271
WATER	2,457
LIABILITY INSURANCE	2,188
AUTO INSURANCE	2,959
WATER BOTTLES	830
OUTSIDE SERVICES	42,000
LANDSCAPING	1,020
Total	88,899